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| REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS | Application Number | 08/809,699 |
| | Filing Date | 03/27/1997 |
| | First Named Inventor | Hartmut Riechers |
| | Art Unit | 1611 |
| | Examiner Name | B. Kille |
| | Attorney Docket Number | 065571-0011 |

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 38,939

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number: 38,939

OR

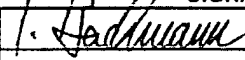
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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-----------|---|--------------------|--|
| Signature |  | | |
| Name | Jurgan Bachmann | Susanne Zimmermann | |
| Date | | Telephone | |

NOTE: Signatures of all the Inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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